

COMMERCIAL PESTICIDE APPLICATOR CERTIFICATION APPLICATION

KANSAS DEPARTMENT OF AGRICULTURE
RECORDS CENTER - PESTICIDE
109 SW NINTH STREET, TOPEKA, KS 66612
Phone (785) 296-5360, Fax (785) 296-6418
E-mail: records@kda.state.ks.us
Website: <http://www.ink.org/public/kda/>

1. Have you **EVER tested** for Commercial Pesticide Applicator Certification in Kansas before? YES _____ NO _____
Please provide Kansas Certification Number if you are currently certified or have ever been certified:

2. PERSONAL INFORMATION:

Social Security No.						Telephone	
Last Name						Fax	
First Name							
Birth Date							
Address							
City		County		State		Zip	
E-Mail							

3. CATEGORY/SUBCATEGORY: Please check the categories or subcategories for which you are applying for certification:

<input type="checkbox"/>	1A - Agricultural Plant Pest Control	<input type="checkbox"/>	4 - Seed Treatment	<input type="checkbox"/>	7D - Health-Related Pest Control
<input type="checkbox"/>	1B - Agricultural Animal Pest Control	<input type="checkbox"/>	5 - Aquatic Pest Control	<input type="checkbox"/>	7E - Structural Pest Control
<input type="checkbox"/>	1C - Wildlife Damage Control	<input type="checkbox"/>	5S - Aquatic Pest Control - Sewer	<input type="checkbox"/>	7F - Wood Preservation/Wood Products
<input type="checkbox"/>	2 - Forest Pest Control	<input type="checkbox"/>	6 - Right-of-Way Pest Control	<input type="checkbox"/>	8 - Public Health Pest Control
<input type="checkbox"/>	3A - Ornamental Pest Control	<input type="checkbox"/>	7A - Wood-Destroying Pest Control	<input type="checkbox"/>	9A - Noxious Weed Pest Control
<input type="checkbox"/>	3B - Turf Pest Control	<input type="checkbox"/>	7B - Stored Products Pest Control	<input type="checkbox"/>	9B - Regulated Pest Control
<input type="checkbox"/>	3C - Interior Landscape Pest Control	<input type="checkbox"/>	7C - Industrial Weed Control	<input type="checkbox"/>	10 - Demonstration/Research Pest Control

4. **CERTIFICATION PROBLEMS:** Have you had a pesticide certification or license suspended, revoked, or denied in any state during the last five years? If yes, please provide the states, years, and a brief description of the problem.

YES _____ NO _____

PLEASE DO NOT WRITE IN THIS BOX (For Kansas Department of Agriculture use only)

Fee	Code	Transaction No	Receipt Date	Check No	Ccert #	Categories	Entry	Certified by	Eff Date	Exp Date	Initials	Process Date
	PUE											
	CMC											

PLEASE COMPLETE INFORMATION ON REVERSE SIDE OF THIS FORM

5. **EMPLOYER INFORMATION:** If you plan to use your commercial pesticide applicator certification to apply pesticides for **compensation**, you must work as an employee of a pesticide business licensed to apply pesticides in the categories you are certified in or obtain your own Pesticide Business License. *Please complete employer information even if you are not working for a pesticide business.*

Employer Pesticide Business License No.		Tax ID: (if known)		Employment Date:	
Employer Name:					
Employer Address:					
Employer City, State, Zip:				Employer Phone:	

6. **OTHER STATE CERTIFICATION OR LICENSE INFORMATION:** Please indicate any other pesticide certifications or licenses you have had in other states during the past five years:

State	Years		State	Years		State	Years		State	Years

7. **CERTIFICATION BY RECIPROCITY:** Kansas has limited reciprocal agreements with MISSOURI, NEBRASKA, OKLAHOMA, and INDIANA. If you wish to apply for certification, or re-entry of certification by reciprocity in lieu of passing exams please complete this application and **CALL THE RECORDS CENTER IMMEDIATELY** to allow adequate time to complete the reciprocal process and determine the required fees. (785-296-5360)

_____ Missouri Certification Number _____ Oklahoma Certification Number
 _____ Nebraska Certification Number _____ Indiana Certification Number

8. **REQUIRED FEES:** The application fee is \$50 per category and the exam fee is \$35 per category. The per category fee includes all subcategories within one category. For example, Category 3 includes subcategories 3A, 3B & 3C. No fee is required for the General exam. Applicants who fail exams may retest upon paying an additional fee of \$35 per category. Call the Records Center for fees for reciprocity. (785-296-5360)
9. **EFFECTIVE PERIOD:** Commercial Pesticide Applicator Certification expires on December 31 of the second calendar year after the year of issue, unless renewed prior to that date. Certification may be renewed for a succeeding three-year period by training, examination or reciprocity and with the receipt by KDA of appropriate fees & application form.

APPLICANT SIGNATURE: I hereby attest the information on this application is true, complete and accurate.

SIGNATURE: _____ DATE SIGNED: _____